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APPLICANTS

Gundolf Kiefer, Aachen, GERMANY;
 Heiko Lehmann, Aachen, GERMANY;
 Jurgen Weese, Aachen, GERMANY;
 Marc Busch, Aachen, GERMANY;

/AT/

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Met after Allowance /AT/ Initials	GERMANY	5	14
Verified and Acknowledged _____ Examiner's Signature	/ABOLFAZL TABATABAI/				4

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TITLE

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